STATE OF CALIFORNIA—HEALTH AND WELFARE AGENCY

George Deukmejian, Governor

DEPARTMENT OF HEALTH SERVICES
714/744 P STREET
SACRAMENTO, CA 95814
(916) 445-1912

January 6, 1983

To: All County Welfare Directors

Letter No. 83-3

COUNTY MEDICAL SERVICES PROGRAM -- IDENTIFICATION CARD

Attached for your information is a sample of the County Medical Services Program (CMSP) identification card. This card will be provided to CMSP individuals residing in those counties that have chosen the option of contracting back with the Department for administrative services associated with the CMSP.

The CMSP card will be provided to persons each month they are eligible for the CMSP.

While the CMSP card is printed on paperstock with perforated lines on the right half of the card (where labels would exist on a Medi-Cal card) the perforated sections are not intended for removal by the provider.

Providers, including out-of-state providers who will submit claims using the CMSP card must meet Medi-Cal program provider requirements. Provider bulletins will be released soon describing the billing procedures for services rendered to CMSP beneficiaries.

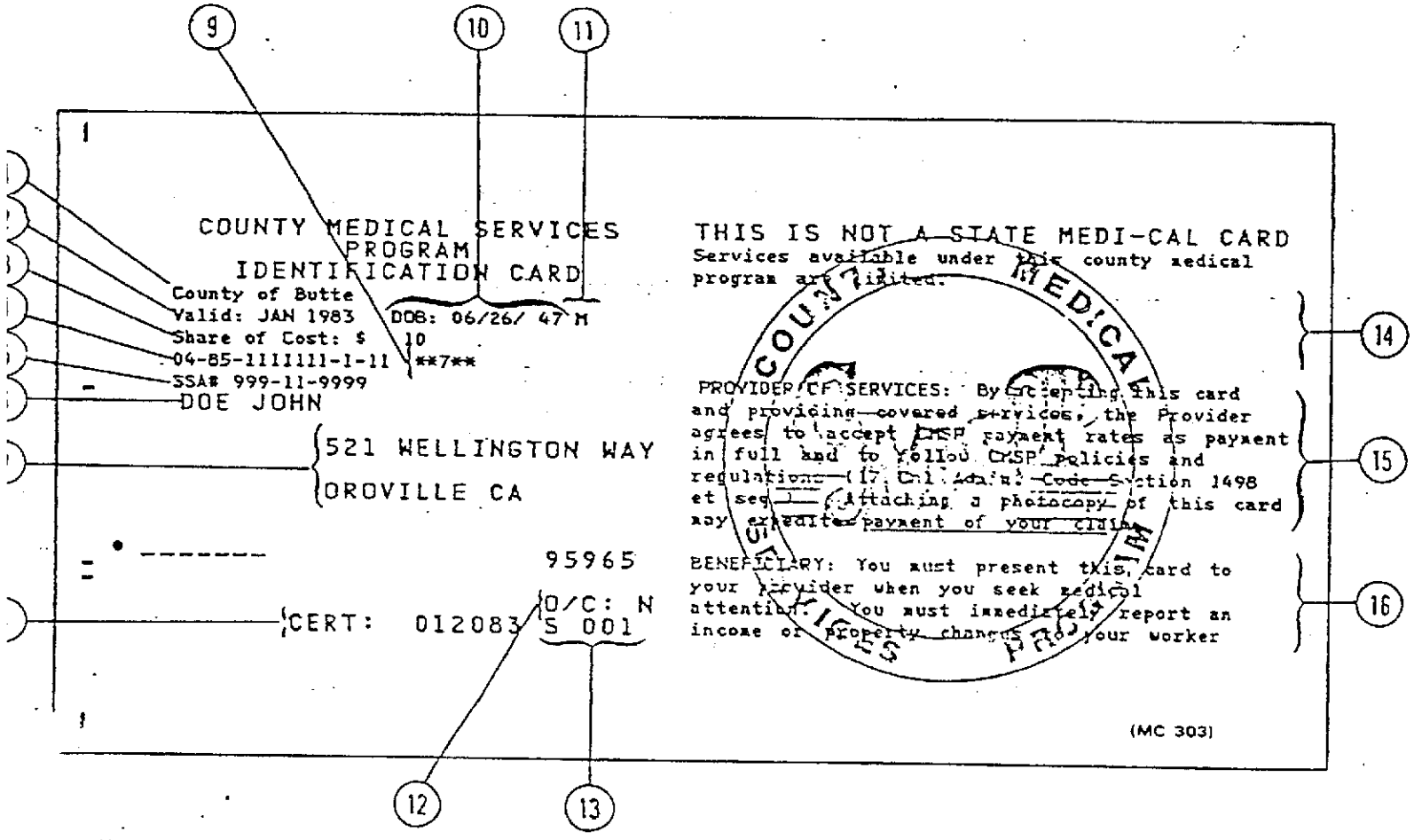
If you have any questions, please contact Laura Vargas, 714 P Street, Room 1350 Sacramento, CA 95814, (916) 445-1161.

Sincerely,

ORIGINAL SIGNED BY

Madalyn M. Martinez, Chief
Eligibility Branch

Attachment
cc: Medi-Cal Liaisons
Medi-Cal Program Consultants
Peter Abbott, 8/1350



Note: Although the card is printed on paperstock with perforated lines on the right half of the card, the perforations are not intended for use by providers.

1. Beneficiary County of Residence
2. Valid Month of Card
3. Share of Cost Amount
4. Beneficiary ID number
5. Beneficiary Social Security Number
6. Beneficiary Name
7. Beneficiary Address
8. Date of Certification (Only applies for SOC Beneficiaries 85 & 89)
9. Beneficiary ID Number Check Digit
10. Date of Birth of Beneficiary
11. Sex of Beneficiary
12. Other Coverage Indicator
13. DHS Internal Batch Identifier
14. Future Use Area
15. Provider Instructions
16. Beneficiary Instructions